Case 15-31843-KRH Doc 1 Filed 04/08/15 Entered 04/08/15 16:12:52 Desc Main_{4/08/15 4:10PM}

| B1 (Official Form 1)(04/13) | D | Cument | Ра | ge I oi | ეა | | | |
|--|---|---|---|--|---|--|--|-------------------------------------|
| | States Bank stern District | | | | | | Voluntary | Petition |
| Name of Debtor (if individual, enter Last, First, Hayman, Joani Evelyn | | Name of Joint Debtor (Spouse) (Last, First, Middle): Hayman, Maria Del Pilar | | | | | | |
| All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names): | | | | All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names): FKA Maria Del Pilar Brogan | | | | |
| Last four digits of Soc. Sec. or Individual-Taxpa (if more than one, state all) | yer I.D. (ITIN)/Con | nplete EIN | (if more | our digits of than one, state | all) | r Individual-Ta | axpayer I.D. (ITIN) N | Io./Complete EIN |
| Street Address of Debtor (No. and Street, City, a 6307 Bliley Road Richmond, VA | and State): | ZIP Code | Street 630 | | Joint Debtor Road | (No. and Stre | et, City, and State): | ZIP Code |
| County of Residence or of the Principal Place of Richmond City | f Business: | 23225 | | y of Reside | | Principal Plac | ee of Business: | 23225 |
| Mailing Address of Debtor (if different from stre | | ZIP Code | Mailin | g Address | of Joint Debt | tor (if different | from street address): | ZIP Code |
| (if different from street address above): | | | | | | | | |
| Type of Debtor (Form of Organization) (Check one box) Individual (includes Joint Debtors) See Exhibit D on page 2 of this form. □ Corporation (includes LLC and LLP) □ Partnership □ Other (If debtor is not one of the above entities, check this box and state type of entity below.) Chapter 15 Debtors | | Real Estate as of 101 (51B) roker | lefined | ☐ Chapt ☐ Chapt ☐ Chapt ☐ Chapt | the I er 7 er 9 er 11 er 12 | Petition is File Cha of a Cha of a | cy Code Under Whi ed (Check one box) Apter 15 Petition for F Foreign Main Proce Apter 15 Petition for F Foreign Nonmain Processing Nonmain Proces | Recognition eding Recognition |
| Country of debtor's center of main interests: Each country in which a foreign proceeding by, regarding, or against debtor is pending: | (Check be Debtor is a tax-eunder Title 26 o | empt Entity ox, if applicable) exempt organizate of the United State al Revenue Cod | (Check one box) le) Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as business debt incurred by an individual primarily for | | | | | |
| Filing Fee (Check one box Full Filing Fee attached Filing Fee to be paid in installments (applicable to attach signed application for the court's consideratidebtor is unable to pay fee except in installments. Form 3A. Filing Fee waiver requested (applicable to chapter attach signed application for the court's consideration. | individuals only). Mu ion certifying that the Rule 1006(b). See Off 7 individuals only). M | st Check if: cicial December 2 Check al Aust As | btor is a sr btor is not btor's aggi less than lapplicable plan is bein | a small busing regate nonco \$2,490,925 (as boxes: ag filed with of the plan w | debtor as definess debtor as contingent liquida amount subject this petition. | ated debts (exclusive to adjustment of the adjus | | ee years thereafter). |
| Statistical/Administrative Information ☐ Debtor estimates that funds will be available ☐ Debtor estimates that, after any exempt prop there will be no funds available for distribution | erty is excluded and | unsecured cred | itors. | | 7.0. 3 1120(0). | | SPACE IS FOR COURT | USE ONLY |
| 1- 49 99 199 200- 99 999 | 1,000- 5,000 5,001- 10,000 | 10,001- | 25,001- 50,000 | 50,001- 100,000 | OVER 100,000 | _ | | |
| \$0 to \$50,001 to \$100,001 to \$500,001 \$50,000 \$100,000 \$500,000 to \$1 million | \$1,000,001 \$10,000,00 to \$10 to \$50 million | 1 \$50,000,001 S to \$100 t | \$100,000,001 o \$500 nillion | \$500,000,001 to \$1 billion | | | | |
| \$0 to \$50,001 to \$100,001 to \$500,001 \$50,000 \$100,000 \$500,000 to \$1 | \$1,000,001 \$10,000,00 to \$10 to \$50 million million | 1 \$50,000,001 S to \$100 | 3100,000,001 o \$500 | \$500,000,001 to \$1 billion | | | | |

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B1 (Official Form 1)(04/13) Name of Debtor(s): Voluntary Petition Hayman, Joani Evelyn Hayman, Maria Del Pilar (This page must be completed and filed in every case) All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Case Number: Date Filed: Location Where Filed: - None -Date Filed: Location Case Number: Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: Case Number: Date Filed: - None -District: Relationship: Judge: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) I, the attorney for the petitioner named in the foregoing petition, declare that I (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10O) with the Securities and Exchange Commission have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. I further certify that I delivered to the debtor the notice and is requesting relief under chapter 11.) required by 11 U.S.C. §342(b). ☐ Exhibit A is attached and made a part of this petition. X /s/ Charles H. Krumbein April 8, 2015 Signature of Attorney for Debtor(s) (Date) Charles H. Krumbein 01234 Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and Exhibit C is attached and made a part of this petition. No. Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: ■ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).

B1 (Official Form 1)(04/13)

Voluntary Petition

(This page must be completed and filed in every case)

Name of Debtor(s):

Hayman, Joani Evelyn Hayman, Maria Del Pilar

Signatures

Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Joani Evelyn Hayman

Signature of Debtor Joani Evelyn Hayman

X /s/ Maria Del Pilar Hayman

Signature of Joint Debtor Maria Del Pilar Hayman

Telephone Number (If not represented by attorney)

April 8, 2015

Date

Signature of Attorney*

X /s/ Charles H. Krumbein

Signature of Attorney for Debtor(s)

Charles H. Krumbein 01234

Printed Name of Attorney for Debtor(s)

Krumbein & Associates, PLLC

Firm Name

1650 Willow Lawn Drive Suite 201

Richmond, VA 23230

Address

Email: charlesh@krumbein.com (804) 673-4358 Fax: (804) 673-4350

Telephone Number

April 8, 2015

Date

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

 \mathbf{X}

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

X

Date

Address

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.

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B 1D (Official Form 1, Exhibit D) (12/09)

United States Bankruptcy Court Eastern District of Virginia

| In re | Joani Evelyn Hayman Maria Del Pilar Hayman | | Case No. | |
|-------|---|-----------|----------|---|
| | | Debtor(s) | Chapter | 7 |

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.] ____

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

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| B 1D (Official Form 1, Exhibit D) (12/09) - Cont. | Page |
|--|---|
| ☐ 4. I am not required to receive a credit of | counseling briefing because of: [Check the applicable |
| statement.] [Must be accompanied by a motion fo | r determination by the court.] |
| ☐ Incapacity. (Defined in 11 U.S.) | C. § 109(h)(4) as impaired by reason of mental illness or |
| mental deficiency so as to be incapable of | realizing and making rational decisions with respect to |
| financial responsibilities.); | |
| ☐ Disability. (Defined in 11 U.S.C | 2. § 109(h)(4) as physically impaired to the extent of being |
| unable, after reasonable effort, to participa | ate in a credit counseling briefing in person, by telephone, or |
| through the Internet.); | |
| ☐ Active military duty in a militar | y combat zone. |
| ☐ 5. The United States trustee or bankrup requirement of 11 U.S.C. § 109(h) does not apply | tey administrator has determined that the credit counseling in this district. |
| I certify under penalty of perjury that t | he information provided above is true and correct. |
| Signature of Debto | r: /s/ Joani Evelyn Hayman |
| • | Joani Evelyn Hayman |
| Date: April 8, 201 | 5 |
| | |

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B 1D (Official Form 1, Exhibit D) (12/09)

United States Bankruptcy Court Eastern District of Virginia

| In re | Joani Evelyn Hayman Maria Del Pilar Hayman | | Case No. | |
|-------|---|-----------|----------|---|
| | | Debtor(s) | Chapter | 7 |

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.] ____

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

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| B ID (Official Form 1, Exhibit D) (12/09) - Cont. | Page |
|--|--|
| ☐ 4. I am not required to receive a credit cou | unseling briefing because of: [Check the applicable |
| statement.] [Must be accompanied by a motion for a | • |
| ☐ Incapacity. (Defined in 11 U.S.C. | § 109(h)(4) as impaired by reason of mental illness or |
| mental deficiency so as to be incapable of re | alizing and making rational decisions with respect to |
| financial responsibilities.); | |
| ☐ Disability. (Defined in 11 U.S.C. § | § 109(h)(4) as physically impaired to the extent of being |
| unable, after reasonable effort, to participate | in a credit counseling briefing in person, by telephone, o |
| through the Internet.); | |
| ☐ Active military duty in a military of | combat zone. |
| ☐ 5. The United States trustee or bankruptcy requirement of 11 U.S.C. § 109(h) does not apply in | administrator has determined that the credit counseling this district. |
| I certify under penalty of perjury that the | information provided above is true and correct. |
| Signature of Debtor: | /s/ Maria Del Pilar Hayman |
| | Maria Del Pilar Hayman |
| Date: _April 8, 2015 | |
| | |

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B6 Summary (Official Form 6 - Summary) (12/14)

United States Bankruptcy Court Eastern District of Virginia

| In re | Joani Evelyn Hayman, | | Case No. | |
|-------|------------------------|---------|----------|---|
| | Maria Del Pilar Hayman | | | |
| - | | Debtors | Chapter | 7 |
| | | | • | |

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

| NAME OF SCHEDULE | ATTACHED (YES/NO) | NO. OF SHEETS | ASSETS | LIABILITIES | OTHER |
|---|----------------------|------------------|-------------------|-------------|----------|
| A - Real Property | Yes | 1 | 73,800.00 | | |
| B - Personal Property | Yes | 4 | 17,297.64 | | |
| C - Property Claimed as Exempt | Yes | 2 | | | |
| D - Creditors Holding Secured Claims | Yes | 1 | | 154,957.00 | |
| E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E) | Yes | 1 | | 0.00 | |
| F - Creditors Holding Unsecured Nonpriority Claims | Yes | 7 | | 154,527.93 | |
| G - Executory Contracts and Unexpired Leases | Yes | 1 | | | |
| H - Codebtors | Yes | 1 | | | |
| I - Current Income of Individual Debtor(s) | Yes | 2 | | | 2,839.89 |
| J - Current Expenditures of Individual Debtor(s) | Yes | 2 | | | 3,141.52 |
| Total Number of Sheets of ALL Schedu | ıles | 22 | | | |
| | To | otal Assets | 91,097.64 | | |
| | | | Total Liabilities | 309,484.93 | |

B 6 Summary (Official Form 6 - Summary) (12/14)

United States Bankruptcy Court Eastern District of Virginia

| In re | Joani Evelyn Hayman, | | Case No. | |
|-------|------------------------|---------|----------|---|
| | Maria Del Pilar Hayman | | | |
| _ | | Debtors | Chapter | 7 |

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159. Summarize the following types of liabilities, as reported in the Schedules, and total them.

| Type of Liability | Amount |
|---|-----------|
| Domestic Support Obligations (from Schedule E) | 0.00 |
| Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E) | 0.00 |
| Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed) | 0.00 |
| Student Loan Obligations (from Schedule F) | 39,067.00 |
| Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E | 0.00 |
| Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F) | 0.00 |
| TOTAL | 39,067.00 |

State the following:

| Average Income (from Schedule I, Line 12) | 2,839.89 |
|--|----------|
| Average Expenses (from Schedule J, Line 22) | 3,141.52 |
| Current Monthly Income (from Form 22A-1 Line 11; OR, Form 22B Line 14; OR, Form 22C-1 Line 14) | 4,006.48 |

State the following:

| Total from Schedule D, "UNSECURED PORTION, IF ANY" column | | 7,357.00 |
|--|------|------------|
| 2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column | 0.00 | |
| 3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column | | 0.00 |
| 4. Total from Schedule F | | 154,527.93 |
| 5. Total of non-priority unsecured debt (sum of 1, 3, and 4) | | 161,884.93 |

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B6A (Official Form 6A) (12/07)

| In re | Joani Evelyn Hayman, | Case No. |
|-------|------------------------|----------|
| | Maria Del Pilar Hayman | |

Debtors

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Current Value of Husband, Debtor's Interest in Wife, Nature of Debtor's Amount of Description and Location of Property Property, without Interest in Property Joint, or Secured Claim Deducting any Secured Community Claim or Exemption 6307 Bliley Rd **Tenancy by Entirety** 73,800.00 154,957.00 Richmond, VA 23225

Owned Jointly with Jackson Yang Average cost of \$164,000 used less 10% selling cost of \$16,400

Zillow Value \$158.960 Tax Assessed Value is \$182,000

> Sub-Total > 73,800.00 (Total of this page)

73,800.00 Total >

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B6B (Official Form 6B) (12/07)

| In re | Joani Evelyn Hayman, | Case No. |
|-------|------------------------|----------|
| | Maria Del Pilar Hayman | |

Debtors

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

| | Type of Property | N O Description and Location of Property E | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption |
|----|---|--|---|---|
| 1. | Cash on hand | Cash on Hand | J | 5.00 |
| 2. | Checking, savings or other financial | Wells Fargo Checking Account 2353 | J | 23.71 |
| | accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and | Joint account with Jackson Yang | | |
| | homestead associations, or credit unions, brokerage houses, or | Henrico Credit Union 43317 | н | 5.14 |
| | cooperatives. | Virginia Credit Union Checking Account 6008 | н | 1.00 |
| | | Virginia Credit Union Savings Account 6000 | н | 1.00 |
| | | Virginia Credit Union Member Account | J | 5.00 |
| | | Virginia Credit Union Checking Account 6112 | J | 12.79 |
| | | Virginia Credit Union Savings Account 5320 | J | 1.00 |
| 3. | Security deposits with public utilities, telephone companies, landlords, and others. | x | | |
| 4. | Household goods and furnishings, including audio, video, and computer equipment. | Stove, Refrigerator, Washer & Dryer, Microwave, Cooking Utensils, Silverware, Cookware, Sofas, Chairs & Tables, Beds, Dressers, Nightstands, Lamps & Accessories, Tools, Books, and other miscellaneous household goods. | J | 1,850.00 |
| 5. | Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles. | x | | |
| 6. | Wearing apparel. | Women's Clothing, Shoes & Accessories | J | 600.00 |
| 7. | Furs and jewelry. | Wedding Rings | J | 20.00 |
| 8. | Firearms and sports, photographic, and other hobby equipment. | x | | |
| | | (Tota | Sub-Total of this page) | al > 2,524.64 |

3 continuation sheets attached to the Schedule of Personal Property

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B6B (Official Form 6B) (12/07) - Cont.

| In | re Joani Evelyn Hayman, Maria Del Pilar Hayman | | | Case I | No | |
|------|---|------------------|---|----------|---|--|
| | | SC | Debtors CHEDULE B - PERSONAL PROPE (Continuation Sheet) | CRTY | | |
| | Type of Property | N O N E | | | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property without Deducting any Secured Claim or Exemption |
| €. | Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each. | Х | | | | |
| 10. | Annuities. Itemize and name each issuer. | X | | | | |
| l 1. | Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).) | Х | | | | |
| 12. | Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars. | X | | | | |
| 13. | Stock and interests in incorporated and unincorporated businesses. Itemize. | X | | | | |
| 14. | Interests in partnerships or joint ventures. Itemize. | X | | | | |
| 15. | Government and corporate bonds and other negotiable and nonnegotiable instruments. | X | | | | |
| 16. | Accounts receivable. | X | | | | |
| 17. | Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars. | X | | | | |
| 18. | Other liquidated debts owed to debtor including tax refunds. Give particulars. | | Federal and State Tax Refunds | | J | 7,238.00 |
| 19. | Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property. | х | | | | |
| | | | | | | |
| | | | | (Total o | Sub-Tota | nl > 7,238.00 |

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B6B (Official Form 6B) (12/07) - Cont.

| In re | Joani Evelyn Hayman, |
|-------|------------------------|
| | Maria Del Pilar Havmar |

| Case No. |
|----------|
|----------|

Debtors

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

| Type of Property | N O Description and Location of E | of Property Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property without Deducting any Secured Claim or Exemption |
|---|-----------------------------------|---|--|
| 20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust. | Х | | |
| 21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each. | X | | |
| 22. Patents, copyrights, and other intellectual property. Give particulars. | X | | |
| 23. Licenses, franchises, and other general intangibles. Give particulars. | X | | |
| 24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes. | X | | |
| 25. Automobiles, trucks, trailers, and | 2001 Lexus RX300 | Н | 4,325.00 |
| other vehicles and accessories. | 190,000 miles | | |
| | 2002 Ducati Monster Motorcycle | н | 2,000.00 |
| | 82,000 miles | | |
| | 2009 Honda NP550 Moped | н | 1,200.00 |
| 26. Boats, motors, and accessories. | X | | |
| 27. Aircraft and accessories. | X | | |
| 28. Office equipment, furnishings, and supplies. | X | | |
| 29. Machinery, fixtures, equipment, and supplies used in business. | X | | |
| 30. Inventory. | x | | |
| | | Sub-Tota | al > 7,525.00 |

Sheet <u>2</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

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B6B (Official Form 6B) (12/07) - Cont.

| In re | Joani Evelyn Hayman, | Case No |
|-------|------------------------|---------|
| | Maria Del Pilar Hayman | |

Debtors

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

| Type of Property | N O Description and Location of Property E | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption |
|--|--|---|---|
| 31. Animals. | Pet mixed breed dog | J | 10.00 |
| 32. Crops - growing or harvested. Give particulars. | x | | |
| 33. Farming equipment and implements. | x | | |
| 34. Farm supplies, chemicals, and feed. | x | | |
| 35. Other personal property of any kind not already listed. Itemize. | x | | |

| Sub-Total > 10.00 | | (Total of this page) | | Total > 17,297.64 | Case 15-31843-KRH Doc 1 Filed 04/08/15 Entered 04/08/15 16:12:52 Desc Main_{4/08/15 4:10PM} Document Page 15 of 53

B6C (Official Form 6C) (4/13)

| | | G V |
|-------|------------------------|---------|
| In re | Joani Evelyn Hayman, | Case No |
| | Maria Del Pilar Havman | |

Debtors

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

| Debtor claims the exemptions to which debtor is entitled (Check one box) ☐ 11 U.S.C. §522(b)(2) ☐ 11 U.S.C. §522(b)(3) | | ebtor claims a homestead exe Amount subject to adjustment on 4/1, with respect to cases commenced on | /16, and every three years thereaf |
|--|---|--|---|
| Description of Property | Specify Law Providing Each Exemption | Value of Claimed Exemption | Current Value of Property Without Deducting Exemption |
| Real Property 6307 Bliley Rd Richmond, VA 23225 | Va. Code Ann. § 34-4 | 1.00 | 147,600.00 |
| Owned Jointly with Jackson Yang Average cost of \$164,000 used less 10% selling cost of \$16,400 | | | |
| Zillow Value \$158,960 Tax Assessed Value is \$182,000 | | | |
| Cash on Hand Cash on Hand | Va. Code Ann. § 34-4 | 5.00 | 5.00 |
| <u>Checking, Savings, or Other Financial Accounts,</u> Wells Fargo Checking Account 2353 | Certificates of Deposit Va. Code Ann. § 34-4 | 23.71 | 47.41 |
| Joint account with Jackson Yang | | | |
| Henrico Credit Union 43317 | Va. Code Ann. § 34-4 | 5.14 | 5.14 |
| Virginia Credit Union Checking Account 6008 | Va. Code Ann. § 34-4 | 1.00 | 1.00 |
| Virginia Credit Union Savings Account 6000 | Va. Code Ann. § 34-4 | 1.00 | 1.00 |
| Virginia Credit Union Member Account | Va. Code Ann. § 34-4 | 5.00 | 5.00 |
| Virginia Credit Union Checking Account 6112 | Va. Code Ann. § 34-4 | 12.79 | 12.79 |
| Virginia Credit Union Savings Account 5320 | Va. Code Ann. § 34-4 | 1.00 | 1.00 |
| Household Goods and Furnishings Stove, Refrigerator, Washer & Dryer, Microwave, Cooking Utensils, Silverware, Cookware, Sofas, Chairs & Tables, Beds, Dressers, Nightstands, Lamps & Accessories, Tools, Books, and other miscellaneous household goods. | Va. Code Ann. § 34-26(4a) | 1,850.00 | 1,850.00 |
| Wearing Apparel Women's Clothing, Shoes & Accessories | Va. Code Ann. § 34-26(4) | 600.00 | 600.00 |
| Furs and Jewelry Wedding Rings | Va. Code Ann. § 34-26(1a) | 20.00 | 20.00 |
| Other Liquidated Debts Owing Debtor Including T Federal and State Tax Refunds | ax Refund Va. Code Ann. § 34-4 | 7,238.00 | 7,238.00 |

¹ continuation sheets attached to Schedule of Property Claimed as Exempt

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B6C (Official Form 6C) (4/13) -- Cont.

| In re | Joani Evelyn Hayman, | |
|-------|------------------------|--|
| | Maria Del Pilar Hayman | |

Debtors

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

(Continuation Sheet)

| Description of Property | Specify Law Providing Each Exemption | Value of Claimed Exemption | Current Value of Property Without Deducting Exemption | | |
|--|---|----------------------------------|---|--|--|
| Automobiles, Trucks, Trailers, and Other Vehicles 2001 Lexus RX300 | Va. Code Ann. § 34-26(8) | 4,325.00 | 4,325.00 | | |
| 190,000 miles | | | | | |
| 2002 Ducati Monster Motorcycle | Va. Code Ann. § 34-26(8) | 2,000.00 | 2,000.00 | | |
| 82,000 miles | | | | | |
| 2009 Honda NP550 Moped | Va. Code Ann. § 34-4 | 1,200.00 | 1,200.00 | | |
| Animals Pet mixed breed dog | Va. Code Ann. § 34-26(5) | 10.00 | 10.00 | | |

Total: 17,298.64 164,921.34

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B6D (Official Form 6D) (12/07)

| In re | Joani Evelyn Hayman, |
|-------|------------------------|
| | Maria Del Pilar Hayman |

Debtors

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

| | C Husband Wife Joint or Community C U D | | | | | | | | | |
|--|---|-----|--|---|--|--|-----------------------------|----------|--|---------------------------------|
| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B T O R | H W | DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY | | DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY | | N L S P I Q U T G I E F D D | | AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL | UNSECURED PORTION, IF ANY |
| Account No. xxxxxxxx0263 Virginia Credit Union 7500 Boulders View Drive P.O. Box 90010 Richmond, VA 23225 | x | J | Opened 9/01/06 Last Active 12/22/14 Deed of Trust 6307 Bliley Rd Richmond, VA 23225 Owned Jointly with Jackson Yang Average cost of \$164,000 used less 10% selling cost of \$16,400 Zillow Value \$158,960 Value \$ 147,600.00 | T | ATED | | 29,371.00 | 7,357.00 | | |
| Account No. xxxxxxxxx3645 Wells Fargo Home Mortgage P.O. Box 10335 Des Moines, IA 50306 | x | J | Opened 1/01/05 Last Active 3/02/15 Deed of Trust 6307 Bliley Rd Richmond, VA 23225 Owned Jointly with Jackson Yang Average cost of \$164,000 used less 10% selling cost of \$16,400 Zillow Value \$158,960 Value \$ 147,600.00 | | | | 125,586.00 | 0.00 | | |
| Account No. | | | Value \$ | | | | , | | | |
| Account No. | | | Value \$ | | | | | | | |
| continuation sheets attached | Subtotal (Total of this page) 154,957.00 7,357.00 | | | | | | | | | |
| | Total (Report on Summary of Schedules) 7,357.00 | | | | | | | | | |

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B6E (Official Form 6E) (4/13)

| In re | Joani Evelyn Hayman, | Case No. |
|-------|------------------------|----------|
| | Maria Del Pilar Hayman | |

Debtors

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

| ■ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E. |
|--|
| TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets) |
| □ Domestic support obligations Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1). |
| □ Extensions of credit in an involuntary case Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3). |
| ■ Wages, salaries, and commissions Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4). |
| ☐ Contributions to employee benefit plans Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of busines whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5). |
| ☐ Certain farmers and fishermen Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6). |
| □ Deposits by individuals Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7). |
| ☐ Taxes and certain other debts owed to governmental units Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8). |
| ☐ Commitments to maintain the capital of an insured depository institution |
| Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9). |
| ☐ Claims for death or personal injury while debtor was intoxicated |
| Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10). |

^{*} Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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B6F (Official Form 6F) (12/07)

| In re | Joani Evelyn Hayman, Maria Del Pilar Hayman | | Case No. | |
|-------|--|---------|----------|--|
| | | Debtors | , | |

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

| CDEDITORIS MAME | l c | Нп | sband, Wife, Joint, or Community | С | U | D | |
|--|-----------------|------------------|---|-----------|-------|-------------|-----------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B T O R | H W J C | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGEN | LIQUI | I S P U T E | AMOUNT OF CLAIM |
| Account No. x0265, x0235, x0281, 0353 | | | 2013 Medical - St. Francis Medical Center | T | DATED | | |
| Bon Secours Rich Health Cen Attn: Beverly Slater 8580 Magellan Parkway Richmond, VA 23237 | | w | | | | | 1,220.40 |
| Account No. xxxxxxxxxxxx5271 | | | Opened 11/01/10 Last Active 11/30/13 | | H | | , |
| Capital One Bank Attn: Bankruptcy PO Box 30285 Salt Lake City, UT 84130 | | w | Credit Card | | | | 539.00 |
| Account No. xxxxxxxxxxxx7777 Chase Card Services Attn: Bankruptcy Dept. P.O. Box 15298 Wilmington, DE 19850 | | Н | Opened 5/01/00 Last Active 2/04/15 Capital One Credit Card | | | | |
| Account No. xxxxxxxxxxxx6822 | | | Opened 9/01/06 Last Active 10/03/14 | | | | 19,112.00 |
| Chase Card Services Attn: Bankruptcy Dept. P.O. Box 15298 Wilmington, DE 19850 | | н | Credit Card | | | | 17,077.00 |
| | | | | Sub | tota | <u> </u> | 17,077.00 |
| _6 continuation sheets attached | | | (Total of | | | | 37,948.40 |

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| In re | Joani Evelyn Hayman, | Case No. |
|-------|------------------------|----------|
| _ | Maria Del Pilar Hayman | |

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

| CREDITOR'S NAME, | C | Hu | sband, Wife, Joint, or Community | | OC | U | D | |
|--|--------------|-------------|---|--------------|------------|-------------|-------|-----------------|
| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | OD E B T O R | C A M | DATE CLAIM WAS INCURRED A CONSIDERATION FOR CLAIM. IF CI IS SUBJECT TO SETOFF, SO STA | LAIM | CONFINGENT | UNLLQU-DAF | ı ⊢ ı | AMOUNT OF CLAIM |
| Account No. xxxxxxxxxxxxx757 | Γ | | Opened 10/21/04 Last Active 3/15/15 | | Т | T E D | | |
| Chase Card Services Attn: Bankruptcy Dept. P.O. Box 15298 Wilmington, DE 19850 | | w | Credit Card | | | D | | 1,857.00 |
| Account No. xxxxxxxxxxxx379 | | | Opened 7/01/11 Last Active 10/16/14 | | | П | | |
| Citibank USA Centralized Bankruptcy P.O. Box 20363 Kansas City, MO 64195 | | Н | Credit Card | | | | | |
| | | | | | | | | 12,674.00 |
| Account No. Commonwealth Anesthesia Assoc. 9327 Midlothian Tpke P.O. Box 35808 Richmond, VA 23235 | | J | 2013 Medical | | | | | 171.29 |
| Account No. xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx | | w | Opened 9/01/10 Last Active 1/02/13 Educational | | | | | 6,529.00 |
| Account No. xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx | | w | Opened 8/01/11 Last Active 1/02/13 Educational | | | | | 6,160.00 |
| Sheet no. 1 of 6 sheets attached to Schedule of | | | | | | otal | | 27,391.29 |
| Creditors Holding Unsecured Nonpriority Claims | | | (| Total of the | 11S | oag | e) l | i |

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B6F (Official Form 6F) (12/07) - Cont.

| In re | Joani Evelyn Hayman, | Case No. |
|-------|------------------------|----------|
| | Maria Del Pilar Hayman | |

Debtors SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

| CREDITOR'S NAME, | C | Hu | sband, Wife, Joint, or Community | | ç | U | D | |
|--|---------------|-------------|--|-----------|-----------|-----|----|-----------------|
| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | O D E B T O R | C H M | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAI IS SUBJECT TO SETOFF, SO STATE. | AT . | | | | AMOUNT OF CLAIM |
| Account No. xxxxxxxxxxxxxxxxxxxxx0927 | Г | П | Opened 9/01/10 Last Active 1/02/13 | | Т | E | | |
| Dept Of Ed/navient Po Box 9635 Wilkes Barre, PA 18773 | | w | Educational | | | D | | 6,040.00 |
| Account No. xxxxxxxxxxxxxxxxxxxXXXXXXXXXXXXXXXXXX | | T | Opened 8/01/11 Last Active 1/02/13 | | | П | | |
| Dept Of Ed/navient Po Box 9635 Wilkes Barre, PA 18773 | | w | Educational | | | | | 5,903.00 |
| Account No. xxxxxxxxxxxxxxxxx0927 | ╁ | ╁ | Opened 9/01/10 Last Active 1/02/13 | | \dashv | Н | | |
| Dept Of Ed/navient Po Box 9635 Wilkes Barre, PA 18773 | - | w | Educational | | | | | 2,611.00 |
| Account No. xxxxxxxxxxxxxxxxxxxxxx0817 | | | Opened 8/01/11 Last Active 1/02/13 | | \exists | П | | |
| Dept Of Ed/navient Po Box 9635 Wilkes Barre, PA 18773 | | w | Educational | | | | | 2,464.00 |
| Account No. xxxxxxxxxxxxx886 | Γ | | Opened 10/01/94 Last Active 9/15/14 | | | | | |
| Discover Fin Svcs Llc PO Box 15316 Wilmington, DE 19850 | | н | Credit Card | | | | | 13,798.00 |
| Sheet no. 2 of 6 sheets attached to Schedule of | | | | Su | bt | ota | l | 30,816.00 |
| Creditors Holding Unsecured Nonpriority Claims | | | (Total | al of thi | s t | pag | e) | 30,610.00 |

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B6F (Official Form 6F) (12/07) - Cont.

| In re | Joani Evelyn Hayman, | C | Case No |
|-------|------------------------|---|---------|
| | Maria Del Pilar Hayman | | |

Debtors SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

| | С | Hus | sband, Wife, Joint, or Community | l c | U | D | |
|---|----------|---------|---|-----------|-------------|----------------------------|-----------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | 0 | I > - 0 | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONFLEGEN | L I Q | I S P U T F | AMOUNT OF CLAIM |
| Account No. xxxxxxxxxx1084 | | | Opened 6/01/10 Last Active 3/03/15 | Т | T E D | | |
| First National Bank Attn: FNN Legal Dept 1620 Dodge St Stop 3290 Omaha, NE 68197 | | н | Credit Card | | | | 13,184.00 |
| Account No. xxxxxxxxxxx2274 | t | | Opened 9/01/11 Last Active 9/17/14 | | | | |
| GECRB PO Box 103104 Roswell, GA 30076 | | н | American Eagle Credit Card | | | | 5.005.00 |
| | | | | | | | 5,905.00 |
| Account No. xxxxxxxxxxxxx3048 GECRB PO Box 103104 Roswell, GA 30076 | | w | Opened 5/27/12 Last Active 11/22/13 Lowes Charge Account | | | | 1,000.00 |
| Account No. xxxxxxxxxxx7448 | H | | Opened 4/29/12 Last Active 6/25/13 | | | | |
| GECRB PO Box 103104 Roswell, GA 30076 | | Н | Lowes Charge Account | | | | 0.00 |
| Account No. xxxxxxxxxxx2605 | \vdash | | Opened 11/01/11 Last Active 10/24/14 | + | \vdash | \vdash | 3.00 |
| GECRB / Gap PO Box 103104 Roswell, GA 30076 | | н | Gap Credit Card | | | | 6,263.00 |
| Sheet no. 3 of 6 sheets attached to Schedule of | | | | Sub | tota | <u>—</u> п | |
| Creditors Holding Unsecured Nonpriority Claims | | | (Total of | | | | 26,352.00 |

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B6F (Official Form 6F) (12/07) - Cont.

| In re | Joani Evelyn Hayman, | Case No |
|-------|------------------------|---------|
| | Maria Del Pilar Hayman | |

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

| | | | | | _ | _ | 1 |
|--|----------|-------------|---|------------|-------------|------------------|-----------------|
| CREDITOR'S NAME, | C | Hu | sband, Wife, Joint, or Community | C | U N L | P | |
| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | C A M | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTLNGENT | I QU I D | P U T E | AMOUNT OF CLAIM |
| Account No. xxxxxxxxxxx4418 | | | Opened 9/01/07 Last Active 1/26/14 |] T | Ā T E | | |
| GECRB / Sam's Club PO Box 103104 Roswell, GA 30076 | | н | Sam's Club Charge Account | | D | | 188.00 |
| Account No. xxxxxxxxxxxx8631 | | | Opened 1/01/12 Last Active 6/20/14 | Т | Г | Г | |
| HSBC - Menards Attn: Bankruptcy Department P.O. Box 5263 Carol Stream, IL 60197 | | Н | Credit Card | | | | |
| ĺ | | | | | | | 8,451.00 |
| Account No. x2392 | ŀ | | 01/05/2015 Medical | | | | |
| James River OB/GYN 7101 Jahnke Road Ste 280 Richmond, VA 23225 | | J | | | | | |
| | | | | ╙ | L | L | 115.32 |
| Account No. xxxx9361 | | | Bon Secours Richmond Hith Sy | | | | |
| Miramedrg 991 Oak Creek Dr Lombard, IL 60148 | | w | | | | | 486.00 |
| Account No. xxxxxxxxxxxxxxxxx1031 | ┨ | - | Opened 10/01/06 Last Active 4/08/13 | \vdash | \vdash | \vdash | 13336 |
| Navient PO Box 9500 Wilkes Barre, PA 18773 | | w | Educational | | | | 5,201.00 |
| Sheet no. 4 of 6 sheets attached to Schedule of | - | | | Subt | tota | ـــــا ا | |
| Creditors Holding Unsecured Nonpriority Claims | | | (Total of t | | | | 14,441.32 |

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B6F (Official Form 6F) (12/07) - Cont.

| In re | Joani Evelyn Hayman, | Case No. |
|-------|------------------------|----------|
| | Maria Del Pilar Hayman | |

Debtors SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

| CREDITOR'S NAME, | C | Hu | sband, Wife, Joint, or Community | С | U | D | |
|--|----------|-------------|---|----------|-------------|-------------|-----------------|
| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | C A H | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | ONTINGEN | ONLIGUIDATE | P U T | AMOUNT OF CLAIM |
| Account No. xxxxxxxxxxxx9797 | | | Opened 4/01/10 Last Active 8/15/14 | Ť | T E D | | |
| Navient P0 Box 9655 Wilkes Barre, PA 18773 | x | w | Educational | | D | | 4,159.00 |
| Account No. xxxxxxxxxxx3048 | + | | Opened 8/01/14 Synchrony Bank Credit card | | | | 4,100.00 |
| Portfolio Recovery Associates POB 41067 Norfolk, VA 23541 | | w | | | | | |
| | | | | | | | 1,515.00 |
| Account No. xxxxxxxxxxxx4062 Sears/cbna PO Box 6283 Sioux Falls, SD 57117 | | w | Opened 3/01/99 Last Active 3/13/15 Credit Card | | | | 524.00 |
| Account No. xxxx0564 Transworld Sys Inc/38 507 Prudential Rd Horsham, PA 19044 | | w | Opened 3/01/14 Collection Attorney Hospitalist Of Virginia Llp | | | | |
| | | | | | | | 903.00 |
| Account No. x5071 Tucker Psychiatric Clinic, Inc 1000 Boulders Pkwy Ste. 202 Richmond, VA 23225 | | J | 3/16/2015 Medical | | | | 20.00 |
| Sheet no. <u>5</u> of <u>6</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | ? | | S (Total of th | ubi | | | 7,121.00 |

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B6F (Official Form 6F) (12/07) - Cont.

| In re | Joani Evelyn Hayman, | Case No. |
|-------|------------------------|----------|
| | Maria Del Pilar Hayman | |

Debtors SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

| | _ | | | | | _ | |
|---|----------|-----|--------------------------------------|------------------|------|------------------|-----------------|
| CREDITOR'S NAME, | | Hu | sband, Wife, Joint, or Community | - c | U | P | ' |
| MAILING ADDRESS | CODEBTOR | н | DATE CLAIM WAS INCURRED AND | Ň | Ļ | D I S P | |
| INCLUDING ZIP CODE, | B | W | CONSIDERATION FOR CLAIM. IF CLAIM | H | 10 | U | i |
| AND ACCOUNT NUMBER | T | C | IS SUBJECT TO SETOFF, SO STATE. | I N | ١٢ | E | AMOUNT OF CLAIM |
| (See instructions above.) | R | ١ | , | N G E N | D | D | |
| Account No. xxxxxxxx47-00 | | | Opened 6/18/14 Last Active 1/02/15 | Π̈́ | ΙT | | |
| | 1 | | Judgment Pending in Richmond General | | Ė | | |
| Virginia Cradit Union | ı | | District Court | | | t | 1 |
| Virginia Credit Union | ı | н | District Gount | | | | |
| 7500 Boulders View Drive | ı | " | | | | | |
| P.O. Box 90010 | ı | | | | | | |
| Richmond, VA 23225 | ı | | | | | | |
| | ı | | | | | | 10,200.00 |
| A (N. 1999) 1999 5000 | ╁ | ┢ | 042 | + | ╁ | ╁ | |
| Account No. xxxx-xxxx-xxxx-5000 | 1 | | 8/13 Bank overdraft | | | | |
| | ı | | Bank overgraft | | | | |
| Virginia Credit Union | ı | | | | | | |
| 7500 Boulders View Drive | ı | w | | | | | |
| P.O. Box 90010 | ı | | | | | | |
| Richmond, VA 23225 | ı | | | | | | |
| | ı | | | | | | 78.00 |
| | | | | Ш | | | 70.00 |
| Account No. 8760 | ı | | 2015 | | | | |
| | 1 | | Overdraft | | | | |
| Virginia Credit Union | | | | | | | |
| 7500 Boulders View Drive | ı | н | | | | | |
| P.O. Box 90010 | ı | Ι΄΄ | | | | | |
| | ı | | | | | | |
| Richmond, VA 23225 | ı | | | | | | |
| | ı | | | | | | 179.92 |
| Account No. | T | T | | \top | | T | |
| recount ivo. | 1 | | | | | | |
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| Account No. | ╁ | ┢ | | + | + | ╁ | |
| Account No. | 1 | | | | | | |
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| | ı | | | | | | |
| | 1 | | | | | | |
| | | | | 丄 | | | |
| Sheet no. 6 of 6 sheets attached to Schedule of | | | | Sub | tota | ıl | 40 457 00 |
| Creditors Holding Unsecured Nonpriority Claims | | | (Total of | this | pag | ge) | 10,457.92 |
| | | | (| | | | |
| | | | | | Γota | | 154,527.93 |
| | | | (Report on Summary of S | che | dule | es) | 154,527.93 |

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B6G (Official Form 6G) (12/07)

| In re | Joani Evelyn Hayman, | Case No. |
|-------|------------------------|----------|
| | Maria Del Pilar Hayman | |

Debtors

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

■ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract. Case 15-31843-KRH Doc 1 Filed 04/08/15 Entered 04/08/15 16:12:52 Desc Main_{4/08/15 4:10PM}
Document Page 27 of 53

B6H (Official Form 6H) (12/07)

| In re | Joani Evelyn Hayman, | Case No. |
|-------|------------------------|----------|
| | Maria Del Pilar Hayman | |

Debtors

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

Jackson Yang 5803 Country Manor Way Richmond, VA 23234

Jackson Yang 5803 Country Manor Way Richmond, VA 23234

Velia Valenzuela 5810 Russett Leaf Ct Woodbridge, VA 22193

NAME AND ADDRESS OF CREDITOR

Virginia Credit Union 7500 Boulders View Drive P.O. Box 90010 Richmond, VA 23225

Wells Fargo Home Mortgage P.O. Box 10335 Des Moines, IA 50306

Navient P0 Box 9655 Wilkes Barre, PA 18773

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| | | | | - | | |
|------------|--|----------------------------|--|--------------------|--|---|
| | in this information to identify your c | | | | | |
| De | btor 1 <u>Joani Evely</u> | n Hayman | | | | |
| - | btor 2 Maria Del Pi | lar Hayman | | | | |
| Un | ited States Bankruptcy Court for the | : EASTERN DISTRICT | OF VIRGINIA | | | |
| | se number nown) | | - | | | |
| 0 | fficial Form B 6I | | | MM / DE | 0/ YYYY | |
| S | chedule I: Your Inc | ome | | , 22 | 12/1 | 3 |
| atta Pa | ch a separate sheet to this form. Tt 1: Describe Employment | | | | spouse. If more space is needed, (if known). Answer every questio | |
| 1. | Fill in your employment information. | | Debtor 1 | Debto | or 2 or non-filing spouse | |
| | If you have more than one job, | Employment status | ■ Employed | □ En | nployed | |
| | attach a separate page with information about additional | Employment status | ☐ Not employed | ■ No | ot employed | |
| | employers. | Occupation | Training Specialist | | | |
| | Include part-time, seasonal, or self-employed work. | Employer's name | County of Henrico | | | |
| | Occupation may include student or homemaker, if it applies. | Employer's address | 10299 Woodman Road Glen Allen, VA 23060 | | | |
| | | How long employed t | here? <u>11 years</u> | | | |
| Pa | Give Details About Mor | nthly Income | | | | _ |
| | imate monthly income as of the duse unless you are separated. | ate you file this form. If | you have nothing to report for any | line, write \$0 in | the space. Include your non-filing | |
| | ou or your non-filing spouse have more space, attach a separate sheet to | | ombine the information for all empl | oyers for that pe | erson on the lines below. If you need | , |
| | | | | For Debtor 1 | For Debtor 2 or | |

0.00

0.00

0.00

non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 3,527.96 2. deductions). If not paid monthly, calculate what the monthly wage would be. 0.00 3. Estimate and list monthly overtime pay. +\$ Calculate gross Income. Add line 2 + line 3. 3,527.96

Official Form B 6I Schedule I: Your Income page 1

| | tor 1 tor 2 | Joani Evelyn Hayman Maria Del Pilar Hayman | _ | Case | number (<i>if kno</i> | wn) | | | |
|----------|---|---|--|-------------------------|------------------------|----------------------------|----------------------|--|----------|
| | | | | For | Debtor 1 | | | Debtor 2 or n-filing spouse | |
| | Cop | by line 4 here | 4. | \$ | 3,527. | 96 | \$ | 0.00 | |
| 5. | List | all payroll deductions: | | | | | | | |
| | 5a. 5b. 5c. 5d. 5e. 5f. 5g. | Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance Domestic support obligations Union dues | 5a. 5b. 5c. 5d. 5e. 5f. | \$ \$ \$ \$ \$ \$ \$ \$ | 0.0 603.1 0.0 | 93 00 00 20 00 | \$ \$ \$ \$ \$ \$ \$ | 0.00 0.00 0.00 0.00 0.00 0.00 0.00 | |
| • | 5h. | Other deductions. Specify: FSA Healthcare | _ ^{5h.+} | · - | | 43 | | 0.00 | |
| 6. | | I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | \$ <u> </u> | 1,214. | | \$ <u> </u> | 0.00 | |
| 7. 8. | | culate total monthly take-home pay. Subtract line 6 from line 4. all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 7. 8a. | \$ <u></u> | 2,313. | 8 <u>9</u> 00 | \$ <u> </u> | 0.00 | |
| | 8b. | Interest and dividends | 8b. | ş ^Ψ - | | 00 | \$ <u></u> | 0.00 | |
| | 8d. 8e. 8f. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance | 8c. 8d. 8e. | \$_ \$_ \$_ | 0.0 | 00 00 00 | \$ \$ | 0.00 0.00 0.00 | |
| | | that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. | | | | | | | |
| | 0.0 | Specify: Food Stamps Pension or retirement income | _ 8f. | \$_ \$ | 526.0 | _ | \$ <u> </u> | 0.00 | |
| | 8g. 8h. | Other monthly income. Specify: | 8g. 8h.+ | · — | | 00 00 | + \$— | 0.00 | |
| 9. | Add | d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | 526. | 00 | \$ | 0.00 | |
| 10. | Cal | culate monthly income. Add line 7 + line 9. | 10. \$ | | 2,839.89 + | \$ | | 0.00 = \$ 2 | 2,839.89 |
| | | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | | | 2,000.00 | | | | 2,000.00 |
| 11. | Incli othe Do i | te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify: | depen | | • | | | Schedule J. 11. +\$ | 0.00 |
| 12. | | If the amount in the last column of line 10 to the amount in line 11. The reset that amount on the Summary of Schedules and Statistical Summary of Certallies | | | | | | 12. \$ Combine | |
| 13. | Do : | you expect an increase or decrease within the year after you file this form No. | ? | | | | | monthly | income |
| | | Yes. Explain: | | | | | | | |

| Fill | in this informa | ation to identify yo | our case: | | | | | |
|----------|-------------------------------|-------------------------------------|---------------|--|-----------------------|------------|-----------------------|-------------------------------|
| Deb | tor 1 | Joani Evelyr | ո Havmar | 1 | | Ch | eck if this is: | |
| | | Court Every | ···uy····u | • | _ | | An amended filing | |
| Deb | tor 2 | Maria Del Pil | lar Haym | an | | | | ving post-petition chapter |
| (Spo | ouse, if filing) | | | | _ | | 13 expenses as of | the following date: |
| Unit | ed States Bank | ruptcy Court for the | : EASTE | RN DISTRICT OF VIRGIN | IA | | MM / DD / YYYY | |
| Cas | e number | | | | | | A separate filing for | r Debtor 2 because Debtor |
| (If kı | nown) | | | | | | 2 maintains a sepa | |
| \cap 1 | fficial Ec | orm B 6J | | | | | | |
| | | J: Your | _ Evner | 1606 | | | | 12/13 |
| | | | | If two married people ar | e filing together, bo | th are en | ually responsible fo | |
| info | ormation. If n | | eded, atta | ch another sheet to this | | | | |
| Par | | ribe Your House | hold | | | | | |
| 1. | Is this a joi | | | | | | | |
| | ☐ No. Go t | o line 2. | | | | | | |
| | Yes. Doe | es Debtor 2 live i | in a separa | ate household? | | | | |
| | | lo | | | | | | |
| | ΠY | es. Debtor 2 mus | st file a sep | arate Schedule J. | | | | |
| 2. | Do you hav | e dependents? | □ No | | | | | |
| | Do not list Debtor 2. | ebtor 1 and | Yes. | Fill out this information for each dependent | Dependent's relation | | Dependent's age | Does dependent live with you? |
| | Do not state | the | | | | | | □ No |
| | dependents | | | | Son | | 22 months | Yes |
| | | | | | | | | □ No |
| | | | | | Daughter | | 22 months | ■ Yes |
| | | | | | | | | □ No |
| | | | | | | | | ☐ Yes |
| | | | | | | | | □ No |
| ^ | D | | | | | | | ☐ Yes |
| 3. | | penses include of people other t | han | No | | | | |
| | | d your depende | | Yes | | | | |
| | | | | _ | | | | |
| | | nate Your Ongoi | | y Expenses uptcy filing date unless y | ou are using this fo | rm ac a c | supplement in a Cha | untor 13 case to report |
| exp | enses as of plicable date. | a date after the l | bankruptc | y is filed. If this is a supp | elemental Schedule | J, check | the box at the top o | f the form and fill in the |
| Incl | luda avnanse | as naid for with | non-cash | government assistance i | f you know | | | |
| | | | | sluded it on Schedule I: \ | | | | |
| (Off | ficial Form 6 | l.) | | | | | Your expe | enses |
| 4. | | or home owners | | ses for your residence. I | nclude first mortgage | 4. | \$ | 1,096.52 |
| | . , | ded in line 4: | J : | | | | | |
| | | estate taxes | | | | 4a. | \$ | 0.00 |
| | | estate taxes erty, homeowner's | s. or renter | 's insurance | | 4a. 4b. | · | 0.00 0.00 |
| | | - | | ipkeep expenses | | 4c. | | 15.00 |
| | | eowner's associat | | | | 4d. | | 0.00 |
| 5. | Additional | mortgage payme | ents for yo | our residence, such as ho | me equity loans | 5. | \$ | 445.00 |

| Debtor 1 Debtor 2 | Joani Evelyn Hayman Maria Del Pilar Hayman | Case num | ber (if known) | |
|----------------------|---|-----------------|----------------|--------------------------|
| | ities: | | | |
| 6a. | Electricity, heat, natural gas | 6a. | · | 300.00 |
| 6b. | Water, sewer, garbage collection | 6b. | \$ | 0.00 |
| 6c. | Telephone, cell phone, Internet, satellite, and cable services | 6c. | \$ | 0.00 |
| 6d. | Other. Specify: | 6d. | \$ | 0.00 |
| . Foo | od and housekeeping supplies | 7. | \$ | 700.00 |
| . Chi | Idcare and children's education costs | 8. | \$ | 0.00 |
| Clo | thing, laundry, and dry cleaning | 9. | \$ | 100.00 |
|). Pe i | sonal care products and services | 10. | \$ | 100.00 |
| 1. Me | dical and dental expenses | 11. | \$ | 130.00 |
| | nsportation. Include gas, maintenance, bus or train fare. | 12. | \$ | 200.00 |
| | not include car payments. ertainment, clubs, recreation, newspapers, magazines, and books | 13. | \$ | 0.00 |
| | aritable contributions and religious donations | 14. | \$ | |
| | • | 14. | a | 0.00 |
| | urance. not include insurance deducted from your pay or included in lines 4 or 20. | | | |
| | Life insurance | 15a. | \$ | 0.00 |
| | . Health insurance | 15b. | · | 0.00 |
| 150 | . Vehicle insurance | 15c. | \$ | 45.00 |
| 150 | l. Other insurance. Specify: | 15d. | \$ | 0.00 |
| | res. Do not include taxes deducted from your pay or included in lines 4 or 20. | | · | 0.00 |
| Spe | ecify: Personal Property Taxes | 16. | \$ | 10.00 |
| | tallment or lease payments: | 47- | • | |
| | . Car payments for Vehicle 1 | 17a. | \$ | 0.00 |
| | Car payments for Vehicle 2 | 17b. | \$ | 0.00 |
| | Other. Specify: | 17c. | \$ | 0.00 |
| | . Other. Specify: | 17d. | \$ | 0.00 |
| | ur payments of alimony, maintenance, and support that you did not report as | s 18. | \$ | 0.00 |
| | Iucted from your pay on line 5, Schedule I, Your Income (Official Form 6I). Her payments you make to support others who do not live with you. | 10. | \$ | |
| | ecify: | 19. | Ψ | 0.00 |
| | per real property expenses not included in lines 4 or 5 of this form or on Sch | | our Income | |
| | . Mortgages on other property | 20a. | | 0.00 |
| | Real estate taxes | 20b. | | 0.00 |
| 200 | Property, homeowner's, or renter's insurance | 20c. | \$ | 0.00 |
| | l. Maintenance, repair, and upkeep expenses | 20d. | · | 0.00 |
| | . Homeowner's association or condominium dues | 20e. | · | 0.00 |
| | er: Specify: | 21. | · | 0.00 |
| | | | | 0.00 |
| | ur monthly expenses. Add lines 4 through 21. | 22. | \$ | 3,141.52 |
| | e result is your monthly expenses. | | | |
| | culate your monthly net income. | 22 | Φ. | 0.000.00 |
| | Copy line 12 (your combined monthly income) from Schedule I. | 23a. | | 2,839.89 |
| 23b | . Copy your monthly expenses from line 22 above. | 23b. | -\$ | 3,141.52 |
| 230 | Subtract your monthly expenses from your monthly income. | | | 001.00 |
| | The result is your monthly net income. | 23c. | \$ | -301.63 |
| For | you expect an increase or decrease in your expenses within the year after y example, do you expect to finish paying for your car loan within the year or do you expect you lification to the terms of your mortgage? No. | | | or decrease because of a |
| | Yes. | | | |
| Fyr | olain: | | | |

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B6 Declaration (Official Form 6 - Declaration). (12/07)

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United States Bankruptcy Court Eastern District of Virginia

| In re | Joani Evelyn Hayman Maria Del Pilar Hayman | | Case No. | Case No. | |
|-------|---|-----------|----------|----------|--|
| | | Debtor(s) | Chapter | 7 | |

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

| | I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of sheets, and that they are true and correct to the best of my knowledge, information, and belief. | | | | | |
|------|---|-----------|--|--|--|--|
| Date | April 8, 2015 | Signature | /s/ Joani Evelyn Hayman Joani Evelyn Hayman Debtor | | | |
| Date | April 8, 2015 | Signature | /s/ Maria Del Pilar Hayman | | | |

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

Maria Del Pilar Hayman

Joint Debtor

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B7 (Official Form 7) (04/13)

United States Bankruptcy Court Eastern District of Virginia

| In re | Joani Evelyn Hayman Maria Del Pilar Hayman | | Case No. | |
|-------|---|-----------|----------|---|
| | | Debtor(s) | Chapter | 7 |

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| AMOUNT | SOURCE |
|-------------|-------------------------------------|
| \$11,398.01 | 2015 YTD: Husband County of Henrico |
| \$33,338.00 | 2014: Husband County of Henrico |
| \$35,539.00 | 2013: Husband County of Henrico |
| \$4,407.00 | 2013: Wife Employment Income |

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2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT

SOURCE

3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATES OF **PAYMENTS**

AMOUNT PAID

AMOUNT STILL **OWING**

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225*. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not

> DATES OF PAYMENTS/

AMOUNT PAID OR VALUE OF **TRANSFERS**

AMOUNT STILL **OWING**

NAME AND ADDRESS OF CREDITOR

TRANSFERS

c. All debtors: List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of

spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.) NAME AND ADDRESS OF CREDITOR AND

RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both

AMOUNT PAID

AMOUNT STILL **OWING**

4. Suits and administrative proceedings, executions, garnishments and attachments

None

None

a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER Virginia Credit Union v Joani E. Hayman GV-15004347

NATURE OF **PROCEEDING** WID

COURT OR AGENCY AND LOCATION Richmond General District Ct. STATUS OR DISPOSITION **Pending**

400 N 9th Street

John Marshall Bldg, Room 203

Richmond, VA 23219

None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not

 $[^]st$ Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF PROPERTY

5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER

DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN

DESCRIPTION AND VALUE OF PROPERTY

6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately

preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER DESCRIPTION AND VALUE OF

PROPERTY

7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION

RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

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9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE

Krumbein & Associates, PLLC 1650 Willow Lawn Drive Suite 201 Richmond, VA 23230 DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR March 31, 2015 AMOUNT OF MONEY
OR DESCRIPTION AND VALUE
OF PROPERTY
\$2,200 - \$50 Mandatory
Classes; \$53 Credit Report;
\$335 Filing Fee; \$1,762
Attorney Fees.

10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY

11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION
Virginia Credit Union
7500 Boulders View Drive

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE Checking Account - August 2013

AMOUNT AND DATE OF SALE OR CLOSING

-\$78

12. Safe deposit boxes

None

P.O. Box 90010 Richmond, VA 23225

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY

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13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

15. Prior address of debtor

None

If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DATE OF

ENVIRONMENTAL

GOVERNMENTAL UNIT NOTICE LAW

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous

Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME AND ADDRESS

NAME AND ADDRESS OF

DATE OF

ENVIRONMENTAL

GOVERNMENTAL UNIT NOTICE LAW

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which

the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

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NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

18. Nature, location and name of business

None

a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN ADDRESS

BEGINNING AND

NATURE OF BUSINESS ENDING DATES

None

NAME

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME ADDRESS

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS

DATES SERVICES RENDERED

None b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME ADDRESS

DATES SERVICES RENDERED

None c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME ADDRESS

None d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS DATE ISSUED

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20. Inventories

None

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY

(Specify cost, market or other basis)

None b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS

DATE OF INVENTORY

21. Current Partners, Officers, Directors and Shareholders

None

a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS

TITLE

NATURE AND PERCENTAGE OF STOCK OWNERSHIP

22. Former partners, officers, directors and shareholders

None

a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME ADDRESS

None b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS

TITLE

DATE OF TERMINATION

23 . Withdrawals from a partnership or distributions by a corporation

None

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

DATE OF WITHDRAWAL

24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

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25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

* * * * * *

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

| Date | April 8, 2015 | Signature | /s/ Joani Evelyn Hayman |
|------|---------------|-----------|----------------------------|
| | | | Joani Evelyn Hayman |
| | | | Debtor |
| | | | |
| Date | April 8, 2015 | Signature | /s/ Maria Del Pilar Hayman |
| | | - | Maria Del Pilar Hayman |
| | | | Joint Debtor |

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

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B8 (Form 8) (12/08)

Property is (check one):

Claimed as Exempt

United States Bankruptcy Court Eastern District of Virginia

| In re | Joani Evelyn Hayman Maria Del Pilar Hayman | | | Case No. | |
|--------|---|---------------------|--|--|--------|
| | • | Ι | Debtor(s) | Chapter | 7 |
| PART | CHAPTER 7 INDIX | e estate. (Part A m | ust be fully comp | . (1 01 11 (11) | , 2201 |
| Proper | property of the estate. Attach addit ty No. 1 | tional pages if nec | essary.)] | | |
| Credi | tor's Name: ia Credit Union | | Describe Property 6307 Bliley Rd Richmond, VA 23: Owned Jointly wir Average cost of \$ \$16,400 Zillow Value \$158 Tax Assessed Val | 225 th Jackson Yan 164,000 used le | |
| Proper | ty will be (check one): | | | | |
| | Surrendered | Retained | | | |
| | ining the property, I intend to (check at least | | id lian weing 11 U.S | C 8 500(£) | |
| ഥ | Other. Explain | _ (10r example, avo | id lien using 11 U.S | s.c. § 322(1)). | |

☐ Not claimed as exempt

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| B8 (Form 8) (12/08) | | <u> </u> | Page 2 | |
|---|-----------------------------|--|--|--|
| Property No. 2 | | | | |
| Creditor's Name: Wells Fargo Home Mortgage | | Describe Property Securing Debt: 6307 Bliley Rd Richmond, VA 23225 Owned Jointly with Jackson Yang Average cost of \$164,000 used less 10% selling cost of \$16,400 Zillow Value \$158,960 | | |
| | | Tax Assessed Value | e is \$182,000 | |
| Property will be (check one): ☐ Surrendered | ■ Retained | | | |
| If retaining the property, I intend to (checon Redeem the property ■ Reaffirm the debt □ Other. Explain | | oid lien using 11 U.S.C | f. § 522(f)). | |
| Property is (check one): ■ Claimed as Exempt | | ☐ Not claimed as exc | empt | |
| PART B - Personal property subject to un Attach additional pages if necessary.) | nexpired leases. (All three | ee columns of Part B mu | ast be completed for each unexpired lease. | |
| Property No. 1 | | | | |
| Lessor's Name: -NONE- | Describe Leased Pr | coperty: | Lease will be Assumed pursuant to 11 U.S.C. § 365(p)(2): ☐ YES ☐ NO | |
| I declare under penalty of perjury that personal property subject to an unexpir Date April 8, 2015 | | / intention as to any pro- /s/ Joani Evelyn Haym Joani Evelyn Hayman Debtor | | |
| Date April 8, 2015 | Signature | /s/ Maria Del Pilar Haym Maria Del Pilar Haym Joint Debtor | | |

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Form B203

2014 USBC, Eastern District of Virginia

United States Bankruptcy Court Eastern District of Virginia

| In 1 | Joani Evelyn Hayman re Maria Del Pilar Hayman | Case No | Э. |
|------|--|----------------------|---------------------------------------|
| | Debtor(s) | Chapter | 7 |
| | DISCLOSURE OF COMPENSATION OF ATT | ORNEY FOR | DEBTOR |
| 1. | Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I at compensation paid to me, for services rendered or to be rendered on behalf of the bankruptcy case is as follows: | | |
| | For legal services, I have agreed to accept | \$ | 1,762.00 |
| | Prior to the filing of this statement I have received | | 1,762.00 |
| | Balance Due | \$ | 0.00 |
| 2. | \$335.00 of the filing fee has been paid. | | |
| 3. | The source of the compensation paid to me was: | | |
| | \blacksquare Debtor \square Other (specify) | | |
| 4. | The source of compensation to be paid to me is: | | |
| | \blacksquare Debtor \square Other (specify) | | |
| 5. | ☐ I have not agreed to share the above-disclosed compensation with any other person | n unless they are me | embers and associates of my law firm. |
| | ■ I have agreed to share the above-disclosed compensation with a person or persons copy of the agreement, together with a list of the names of the people sharing in the Classes \$53 - Credit Report | | |
| 6. | In return for the above-disclosed fee, I have agreed to render legal service for all a a. Representation of the debtor in adversary proceedings and other contested bankrup b. Other provisions as needed: | | uptcy case, including: |
| 7. | By agreement with the debtor(s), the above-disclosed fee does not include the following | ng services: | |

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Form B203

Date

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2014 USBC, Eastern District of Virginia

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

| April 8, 2015 | /s/ Charles H. Krumbein | | | |
|-----------------|--|--|--|--|
| Date | Charles H. Krumbein 01234 | | | |
| | Signature of Attorney | | | |
| | Krumbein & Associates, PLLC | | | |
| | Name of Law Firm | | | |
| | 1650 Willow Lawn Drive | | | |
| | Suite 201 | | | |
| | Richmond, VA 23230 (804) 673-4358 Fax: (804) 673-4350 | | | |
| | (32,72,2,2,2,2,2,2,2,2,2,2,2,2,2,2,2,2,2, | | | |
| For use in Chap | oter 13 Cases where Fees Requested Not in Excess of \$5,000 | | | |
| NOTICE TO DEDTO | (For all Cases Filed on or after 8/1/2014) | | | |
| NOTICE TO DEBTO | R(S), STANDING CHAPTER 13 TRUSTEE AND UNITED | | | |
| | STATES TRUSTEE | | | |
| PURSUANT T | TO LOCAL BANKRUPTCY RULE 2016-1(C) AND | | | |
| | CLERK'S CM/ECF POLICY 9 | | | |
| | to Local Bankruptcy Rule 2016-1(C), you must file an objection with the court to the fees requested aid fees in their entirety, or in a specific amount, no later than the last day for filing objections to | | | |
| | PROOF OF SERVICE | | | |
| • | at on this date the foregoing Notice was served upon the debtor(s), the standing Chapter 13 trustee. Rule 2016-1(C) and the Clerk's CM/ECF Policy 9, either electronically or in paper form (first class | | | |

Signature of Attorney

UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF VIRGINIA

NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total Fee \$335)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total Fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the

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Form B 201A, Notice to Consumer Debtor(s)

Page 2

Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1,167 filling fee, \$550 administrative fee: Total Fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total Fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

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B 201B (Form 201B) (12/09)

United States Bankruptcy Court Eastern District of Virginia

| In re | Joani Evelyn Hayman Maria Del Pilar Hayman | Debte | Case No. Or(s) Chapter | 7 |
|---------|---|-------|------------------------------------|-------------------------------|
| | CERTIFICATION OF NOTI UNDER § 342(b) OF T | | | (S) |
| Code. | Certifica I (We), the debtor(s), affirm that I (we) have received a | | | by § 342(b) of the Bankruptcy |
| | Evelyn Hayman Del Pilar Hayman | X | /s/ Joani Evelyn Hayman | April 8, 2015 |
| Printed | d Name(s) of Debtor(s) | • | Signature of Debtor | Date |
| Case N | No. (if known) | X | /s/ Maria Del Pilar Hayman | April 8, 2015 |
| | | • | Signature of Joint Debtor (if any) | Date |

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

ARS National Services PO Box 469046 Escondido, CA 92046

Bon Secours Rich Health Cen Attn: Beverly Slater 8580 Magellan Parkway Richmond, VA 23237

Capital One Bank Attn: Bankruptcy PO Box 30285 Salt Lake City, UT 84130

Capital One Bank, N.A. Bankruptcy Dept P.O. Box 5115 Norcross, GA 30091

Capital One, N.A. c/o American Infosource P.O. Box 54529 Oklahoma City, OK 73154

Chase Card Services Attn: Bankruptcy Dept. P.O. Box 15298 Wilmington, DE 19850

Citibank USA Centralized Bankruptcy P.O. Box 20363 Kansas City, MO 64195

Commonwealth Anesthesia Assoc. 9327 Midlothian Tpke P.O. Box 35808 Richmond, VA 23235

Credit Adjustment Board, Inc. 8002 Discovery Dr Ste 311 Henrico, VA 23229 Dept Of Ed/navient Po Box 9635 Wilkes Barre, PA 18773

Discover Fin Svcs Llc PO Box 15316 Wilmington, DE 19850

First National Bank Attn: FNN Legal Dept 1620 Dodge St. - Stop 3290 Omaha, NE 68197

GECRB PO Box 103104 Roswell, GA 30076

GECRB / Gap PO Box 103104 Roswell, GA 30076

GECRB / Sam's Club PO Box 103104 Roswell, GA 30076

HSBC - Menards Attn: Bankruptcy Department P.O. Box 5263 Carol Stream, IL 60197

James River OB/GYN 7101 Jahnke Road Ste 280 Richmond, VA 23225

Miramedrg 991 Oak Creek Dr Lombard, IL 60148

Navient PO Box 9500 Wilkes Barre, PA 18773 Navient P0 Box 9655 Wilkes Barre, PA 18773

Pellettieri Associates, Inc. 991 Oak Creek Drive Lombard, IL 60148

Portfolio Recovery Associates POB 41067 Norfolk, VA 23541

Sears/cbna PO Box 6283 Sioux Falls, SD 57117

Transworld Sys Inc/38 507 Prudential Rd Horsham, PA 19044

Transworld Systems 507 Prudential Rd Horsham, PA 19044

Tucker Psychiatric Clinic, Inc 1000 Boulders Pkwy Ste. 202 Richmond, VA 23225

Virginia Credit Union 7500 Boulders View Drive P.O. Box 90010 Richmond, VA 23225

Wells Fargo Home Mortgage P.O. Box 10335 Des Moines, IA 50306

| Fill in th | his information to identify your case: | Check one box only as directed in this form and 22A-1Supp: | d in Form |
|----------------------------------|--|---|---------------------|
| Debtor 1 | Joani Evelyn Hayman | | |
| Debtor 2 | mana zorr nar mayman | ■ 1. There is no presumption of abuse | |
| 1 | e, if filing) States Bankruptcy Court for the: Eastern District of Virginia | 2. The calculation to determine if a presumption applies will be made under <i>Chapter 7 Mean. Calculation</i> (Official Form 22A-2). | |
| Case nu (if know | | ☐ 3. The Means Test does not apply now because qualified military service but it could apply la | |
| | | ☐ Check if this is an amended filing | |
| Offici | ial Form 22A - 1 | Ç | |
| Chap | oter 7 Statement of Your Current Mo | nthly Income | 12/14 |
| space is addition you do n | omplete and accurate as possible. If two married people are filing needed, attach a separate sheet to this form. Include the line not pages, write your name and case number (if known). If you be not have primarily consumer debts or because of qualifying milling of Abuse Under § 707(b)(2) (Official Form 22A-1Supp) with | number to which the additional information applies. On the to believe that you are exempted from a presumption of abuse be itary service, complete and file Statement of Exemption from | p of any |
| Part 1: | Calculate Your Current Monthly Income | | |
| 1. W h | hat is your marital and filing status? Check one only. | | |
| | Not married. Fill out Column A, lines 2-11. | | |
| | Married and your spouse is filing with you. Fill out both Columns | s A and B, lines 2-11. | |
| | Married and your spouse is NOT filing with you. You and your | spouse are: | |
| I | ☐ Living in the same household and are not legally separated. | Fill out both Columns A and B, lines 2-11. | |
| l | □ Living separately or are legally separated. fill out Column A, lin penalty of perjury that you and your spouse are legally separate living apart for reasons that do not include evading the Means T | d under nonbankruptcy law that applies or that you and your spou | |
| of you incom | In the average monthly income that you received from all source. 11 U.S.C. § 101(10A). For example, if you are filing on September our monthly income varied during the 6 months, add the income for a ne amount more than once. For example, if both spouses own the same nothing to report for any line, write \$0 in the space. | 15, the 6-month period would be March 1 through August 31. If the ll 6 months and divide the total by 6. Fill in the result. Do not include | ne amount de any |
| | | Column A Column B Debtor 1 Debtor 2 or non-filing spouse | |
| | our gross wages, salary, tips, bonuses, overtime, and commission yroll deductions). | sons (before all \$ 3,480.48 \$ 0.00 | |
| | imony and maintenance payments. Do not include payments from olumn B is filled in. | n a spouse if \$\$ 0.00 \$ | |
| of the front and | I amounts from any source which are regularly paid for househ you or your dependents, including child support. Include regula m an unmarried partner, members of your household, your depended roommates. Include regular contributions from a spouse only if Coed in. Do not include payments you listed on line 3. | r contributions ents, parents, | |
| | et income from operating a business, profession, or farm | | |
| I Gro | oss receipts (before all deductions) \$ 0.00 | | |

Official Form 22A-1

0.00

0.00

0.00

0.00 Copy here -> \$

0.00 Copy here -> \$

0.00

0.00

0.00

-\$

\$

-\$

Gross receipts (before all deductions)

Gross receipts (before all deductions)

7. Interest, dividends, and royalties

Ordinary and necessary operating expenses

6. Net income from rental and other real property

Ordinary and necessary operating expenses

Net monthly income from rental or other real property

Net monthly income from a business, profession, or farm \$

0.00

0.00

0.00

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Joani Evelyn Hayman Debtor 1 Maria Del Pilar Hayman Debtor 2 Case number (if known) Column A Column B Debtor 2 or Debtor 1 non-filing spouse 8. Unemployment compensation 0.00 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you For your spouse 0.00 9. Pension or retirement income. Do not include any amount received that was a 0.00 0.00 benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total on line 10c. 10a. Food Stamps 526.00 0.00 10b. 0.00 0.00 10c. Total amounts from separate pages, if any. \$ 0.00 0.00 11. Calculate your total current monthly income. Add lines 2 through 10 for 4.006.48 0.00 4.006.48 \$ each column. Then add the total for Column A to the total for Column B. Total current monthly income Part 2: **Determine Whether the Means Test Applies to You** 12. Calculate your current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income from line 11 Copy line 11 here=> 12a. 4,006.48 Multiply by 12 (the number of months in a year) X 12 48.077.76 12b. The result is your annual income for this part of the form 12b. 13. Calculate the median family income that applies to you. Follow these steps: VA Fill in the state in which you live. Fill in the number of people in your household. 93.349.00 Fill in the median family income for your state and size of household. 13. 14. How do the lines compare? Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. 14a. 14b. Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 22A-2. Go to Part 3 and fill out Form 22A-2. Part 3: Sign Below By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct. X /s/ Joani Evelyn Hayman X /s/ Maria Del Pilar Hayman Joani Evelyn Hayman Maria Del Pilar Hayman Signature of Debtor 1 Signature of Debtor 2 Date April 8, 2015 Date April 8, 2015 MM / DD / YYYY MM/DD/YYYY If you checked line 14a, do NOT fill out or file Form 22A-2.

Official Form 22A-1

If you checked line 14b, fill out Form 22A-2 and file it with this form.

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Debtor 1 Debtor 2 Joani Evelyn Hayman Maria Del Pilar Hayman

Case number (if known)

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 10/01/2014 to 03/31/2015.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: County of Henrico

Year-to-Date Income:

Last Year:

Starting Year-to-Date Income: \$\frac{\$31,613.25}{\$41,098.12}\$ from check dated \frac{9/30/2014}{12/31/2014}

This Year:

Current Year-to-Date Income: \$11,398.01 from check dated 3/31/2015

Income for six-month period (Current+(Ending-Starting)): \$20,882.88 .

Average Monthly Income: \$3,480.48.

Line 10 - Income from all other sources

Source of Income: **Food Stamps**Constant income of **\$526.00** per month.